



## Augmentative & Alternative Communication

Reviewed by: \_\_\_\_\_ Contact number: \_\_\_\_\_

### **QUALIFICATIONS: Augmentative and Alternative Communication (AAC) devices**

#### **Clinical Practice Recommendation from the VHA Handbook states the Qualifications are:**

*"Prescriptions and requests for special function and/or communication electronic devices will be developed by the speech language pathologist. The special needs of each patient will be documented to clearly establish that the special function device provides superior performance over any of the more common and conventional appliances."*

Augmentative and Alternative Communication (AAC) refers to "an area of research, clinical and educational practice. AAC involves attempts to study and when necessary compensate for temporary or permanent impairments, activity limitations and participation restrictions of individuals with severe disorders of speech-language production and/or comprehension, including spoken and written modes of communication." (ASHA, 2005)

#### **All of the following specific requirements must be met:**

- Complete evaluation by a qualified speech language pathologist that identifies the communication deficit(s) that impair functional communication.
  - Speech/language and communication impairments can be caused by stroke, traumatic brain injury, multiple sclerosis, muscular dystrophy, Parkinson's disease, ALS/Lou Gehrig's disease or other neurological/neuromuscular disorders.
- Use of an AAC device would improve patient's ability to participate and communicate effectively in activities of daily living.
- Able to cognitively and physically (with or without access method) use an AAC device safely and effectively.
- Have visual and auditory skills needed to see and hear device to use it safely and effectively.
- Able to use AAC device independently or with assistance from caregiver for set-up.
- Patient/caregiver will establish a Communication Advocate and participate in Communication Advocate training

### **PROCESS:**

#### **A. Referral**

1. Patient/caregiver identifies interest in alternative and augmentative equipment.
2. Patient will need a referral to Assistive Technology Program from a provider, whether it is a physician, physician's assistant (PA) or nurse practitioner (NP) who is providing care.
3. Once consult has been placed, a qualified Speech-Language Pathologist (SLP) will contact the patient to schedule an appointment in the Assistive Technology (AT) clinic.
4. The SLP will submit an AT consult for assistance from AT team for set-up of equipment and/or additional evaluation of needs, if necessary.

#### **B. Evaluation Process: Roles and Responsibilities of SLP**

- Recognize the needs and interests of individuals who may benefit from AAC devices.
- Assess cognition, language, speech/voice, behavior, motor movement and family/caregiver support.



- Trial patient on various devices to determine which device is most appropriate for patient.
- Determine most appropriate access method in conjunction with AAC devices.
- Discuss recommendations and treatment plan.
- Complete Assistive Technology Outcome Measures.
- Provide Communication Advocate Agreement

C. The following education will be provided:

- VA policy regarding use and care of AAC devices and access equipment.
- Safe and appropriate use of equipment.
- Expected delivery time of device.
- Information regarding maintenance and repair procedures.
- Patient's responsibility for recurring utility charges (i.e. home internet access).

D. Follow-up:

1. Equipment will arrive in SLP clinic or to patient's address on file. Patient will be contacted by SLP to schedule pick up and/or follow-up training.
2. Training will be provided by AAC device vendor in the patient's home, by the SLP in the speech clinic, or CVT (telehealth) to the home if patient is appropriate and has required equipment and provided consent to participate.
3. SLP will provide the patient with contact information for future questions and concerns.

